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ORIGINAL RESEARCH PAPER

SOCIO-DEMOGRAPHIC DETERMINANTS OF PSYCHOLOGICAL WELL-BEING AMONG SCHOOL-GOING ADOLESCENTS IN KASHMIR.

KEY WORDS: Psychological well-being, children in Kashmir, socio-economic factors

Social Science

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Background: This study investigates the psychological wellbeing among school going adolescents, with the aim of examining the influence of various sociodemographic determinants on their psychological well-being. **Materials & Methods:** The research was conducted on a sample of 300 school going adolescents from the Kashmir division with convenience sampling technique used to select the sample. A semi-structured interview schedule for identification of psychological wellbeing and socio-demographic profile of the respondents were used to collect the data. **Results:** The data was classified and tabulated and relevant statistical tools like Average and Chi Square Test were used to observe the severity and magnitude of the problem and to check the overall association between and across the selected variables. Overall, it has been observed that the given sociodemographic variables have a significant association with the psychological well-being of the school going adolescents living in Kashmir. **Conclusion:** The findings of this study will contribute to a better understanding of the mental health landscape among the school going adolescents in Kashmir, and highlighting the sociodemographic areas that require attention and support from the mental health professionals.

INTRODUCTION

ABSTRACT

Adolescence is a distinct stage that exists between childhood and adulthood. People grow quickly in terms of their physical, cognitive, and psychological development throughout this time. Adolescence is therefore a critical developmental stage marked by profound changes in the physical, cognitive, and psychological domains. Ensuring adolescents' psychological well-being and mental health is crucial since it sets the stage for their general development and future paths. The importance of mental and psychological well-being to general human health and functioning has grown in recent years on a global scale.

Mental health refers to a state of well-being in which an individual can cope with the normal stresses of life, work productively, and contribute to their community (World Health Organization [WHO] 2018). Despite the rich cultural traditions and practices related to mental well-being, India faces significant challenges in addressing mental health issues. According to the National Mental Health Survey (2015-2016), nearly 15% of Indian adults (aged 18-49 years) are affected by mental disorders, with a higher prevalence among those in urban areas and those with lower socio-economic status (Gururaj et al., 2016). However, the treatment gap for mental health disorders remains high, with around 80% of individuals not receiving adequate care (Sagar et al., 2017).

MATERIAL AND METHOD Aims and objectives:

The present study was conducted to find out the estimation of prevalence of psychological well-being among school going adolescents.

Sample And Procedure:

The study was conducted on a total of 300 school-going adolescent participants in the age group of 14 to 17 years (mean age 15.5 years) studying in class 9th, 10th, 11th, and 12th schools affiliated with Jammu and Kashmir Board of School Education (JKBOSE). For this purpose, an intensive survey was conducted in six schools randomly drawn from the districts of Srinagar, Ganderbal and Budgam of the Central Kashmir division of UT of J&K.

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Tools Of Data Collection:

A semi-structured interview schedule for identification of psychological wellbeing among the school going adolescents of Central Kashmir region has been used to collect the primary data. The schedule has also important parts of the socio-demographic profile of the respondents which were relevant for the current study.

RESULTS AND INTERPRETATION Table 1: Percentage Distribution Of Psychological Wellbeing Of Adolescent Students

| Psychological Well Being | | No. | % |
|--------------------------|--------------------|-----|-------|
| | Close to Average | 208 | 69.4% |
| | Slightly raised | 42 | 14% |
| | High-Borderline | 22 | 7.3% |
| | Very High-Abnormal | 28 | 9.3% |
| Total | | 300 | 100% |

Close to average-Satisfactory PsychologicalWellbeing

Slightly raised- Minor or Negligible problem in PsychologicalWellbeing means Normal

High-Borderline- May have problems in future, if not taken care of

Very High-Abnormal- Severe or definite problem in PsychologicalWellbeing, requires intervention

From table 1 out of the total students (N=300), 28 students i.e. 9.3% showed Very High score of SDQ in total difficulty. This indicates that they don't fall under normal category, which suggests that these children have definite problems in coping with the difficulties of daily life. These students need intervention. Another 22 students (7.3%) students scored High and are in borderline category. They may have problems, if not taken care of. Rest of the students may have minor or no difficulty scoring 14.0% as Slightly Raised, and 69.4% as Close to Average in SDQ score, which can be termed as normal.

Table 2: Psychological Well Being Of Adolescent Students With Respect To Geographical Location

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| Psychological wellbeing of adolescent students with | | | Geogra Locatio | Total | |
|--|------------------------|-----------|-------------------|--------|--------|
| respect to Location | Geograph | ical | Rural | Urban | |
| Psycholo gical Well | | No. | 55 | 32 | 87 |
| Being | | % | 36.67% | 21.34% | 29% |
| | Slightly Raised | No. | 28 | 30 | 58 |
| | | % | 18.66% | 20% | 19.33% |
| | High- Borderline | No. | 37 | 35 | 72 |
| | | % | 24.67% | 23.33% | 24% |
| | Very High- Abnormal | No. | 30 | 53 | 83 |
| | | % | 20% | 35.33% | 27.67% |
| Total | | Total No. | 150 | 150 | 300 |

From the table 2 it has been observed that out of the total 300 respondents, 50% belonged to rural areas while as rest 50% belonged to urban areas. Within the rural group out of 150 students, 30 respondents i.e. 20% were rated Very High or Abnormal score which means they have problems, with another 37 i.e. 24.67 % as High or Borderline. While as 28 respondents i.e. 18.66 % were rated as slightly Raised and 55 respondents i.e. 36.67% were rated as close to average. This was followed by the students belonging to the Urban areas out of 150 of them, 53 respondents i.e. 35.33% were rated Very High or Abnormal SDQ score with another 35 respondents i.e. 23.33% as High or Borderline score. While as 30 respondents i.e. 20 % were rated as slightly Raised and 32 respondents i.e. 21.34 % were rated as close to average. Overall, if we look at combined demographics of both rural and urban communities, 83 respondents i.e. 27.67% and 72 respondents i.e. 24% have been rated as Very High/High respectively together from both the communities while as 58 respondents i.e. 19.33% and 87 respondents i.e. 29% were rated as slightly raised and close to average respectively.

Table 3: Psychological Wellbeing Of Adolescent Students With Respect To Gender

| Psychological v | Gender | | Total | | |
|------------------------------|------------|--------|--------|--------|--------|
| adolescent stud to Gender | Male | Female | | | |
| Psychological | Close to | No. | 20 | 31 | 51 |
| Well Being | Average | % | 13.33% | 20.67% | 17% |
| | Slightly | No. | 45 | 22 | 67 |
| | Raised | % | 30% | 14.67% | 22.33% |
| | High- | No. | 55 | 50 | 105 |
| | Borderline | % | 36.67% | 33.33% | 35% |
| | Very High- | No. | 30 | 47 | 77 |
| | Abnormal | % | 20% | 31.33% | 25.67% |
| Total | Total No. | | 150 | 150 | 300 |

From the table 3 it has been observed that out of the total 300 respondents, 50% belonged to male category while as rest of the 50% belonged to female category. Within the male group out of 150 students, 30 respondents i.e. 20% were rated Very High or Abnormal score which means they have problems, with another 55 respondents i.e. 36.67 % as High or Borderline. While as 45 respondents i.e. 30 % were rated as slightly raised and 20 respondents i.e. 13.33 % were rated as close to average. This was followed by another 150 respondents belonging to the female category, out of them 47 respondents i.e. 31.33% were rated Very High or Abnormal SDQ score with another 50 respondents i.e. 33.33% as High or Borderline score. While as 22 respondents i.e. 14.67% were rated as slightly raised and 31 respondents i.e. 20.67 % were rated as close to average. Overall if we look at combined demographics of both male and female categories, 77 respondents i.e. 25.67% and 105 respondents i.e. 35% have been rated as very High/High respectively together from both the communities while as 67 respondents i.e. 22.33% and

51 respondents i.e. 17 % were rated as Slightly raised and close to average respectively.

DISCUSSION

The study investigated overall degrees of psychological wellbeing with respect to different socio-demographic variables viz.-gender and geographical location.

The present study estimated that out of the total students under study, 9.3% had overall Mental Health problem and another 7.3% were on the borderline based on SDQ scores. The rate of prevalence found in this study is like the studies conducted by ICMR (2005) in Chandigarh among 963 school going children which was estimated as 9.34%; and 9.4% found in Kerala by Hacket et al. (1999) in 8–12-year-olds.This study revealed a statistically significant difference (p<.011) in prevalence rate of Mental Health problem between male and female students with male students having more than the female students. This result goes with the studies conducted by ICMR (2005), Kaur et al. (2015) and Hussein et al. (2010) with significant difference in the rates of prevalence. The present study also keeps with the findings of Anita et al. (2003), Muzammil et al. (2009), Sharma et al. (2014), Pastor et al. (2012). So far, the geographical location of schools the children were attending was concerned, this study revealed a statistically significant difference in the rate of prevalence of Mental Health problem with children of urban schools showing more than the children of rural schools, keeping with the findings of Sharma (2014). Sarda et al. (2013) and Kaur et al. (2015) found insignificant difference in prevalence between urban and rural children. Studies of Anita et al. (2003) also showed the prevalence rate of Mental Health problem more in urban students than in rural students.

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